Image# 29992462175 FEC FORM 2 **STATEMENT OF CANDIDACY**

4 () 11 () 2 () 11 ()	(' (II)								
1. (a) Name of Candidate	,								
Deborah 'Debbie' Halvo						To bloods	Cara Minarda an		
(b) Address (number and street)						2. Identification Number			
565 Aberdeen Dr (c) City, State and ZIF	2 Codo					3. Is This			
	Code			00447		Statemer	nt New	OR	X Amended
Crete 4. Party Affiliation	F C	IL 60417 5. Office Sought 6. State &					(14)	Uh	(A)
						District of Candidate 11			
DEMOCRATIC PARTY		louse			IL 11				
	DESIG	IOITAN	N OF PRIN	ICIPAL C	AMPAIGN (COMMITTE	EE		
7. I hereby designate the foll	owing named poli	tical commi	ittee as my Pri	ncipal Campa	ign Committee		2010 (year of election	election)	on(s).
NOTE:This designation	n should be filed	with the a	ppropriate off	ice listed in t	he instruction	s.			
(a) Name of Committee	e (in full)								
Halvorson for Cong									
(b) Address (number a	nd street)								
PO Box 1176									
(c) City, State and ZIF	P Code								
Crete IL 60417									
I hereby authorize the follocandidacy.	owing named com				g Representa		and expend fun	ids on be	half of my
NOTE:This designation	n should be filed	with the p	rincipal camp	aign commit	tee.				
(a) Name of Committee	e (in full)								
Women Lead Victo	ry 2008								
(b) Address (number a	nd street)								
430 South Capitol S	Street, SE								
(c) City, State and ZIP	Code								
Washington		D	С	20	003				
I certify that	at I have examine	ed this Sta	tement and to	the best of	my knowledge	e and belief it i	s true, correc	ct, and c	omplete.
Signature of Candidate						Date			
Deborah 'Debbie' Halvorson						07/16/2009			
NOTE: Submission of fals	e, erroneous or	incomplete	e information	may subject	the person si	gning this Stat	tement to pen	alties of	2 U.S.C.§437g.

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Blue Illinois 2008

(b) Address (number and street)

500 N Dearborn

Ste 518

(c) City, State and ZIP Code

Chicago

60610

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Rangel Victory Fund

(b) Address (number and street)

40 West 135th St

Suite 10U

(c) City, State and ZIP Code

New York

10037

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Jared Polis Victory Fund

(b) Address (number and street)

PO Box 1174

(c) City, State and ZIP Code

Springfield

22151